

66/97/90

<div style="float: left; width: 20px; text-align: center;">66/97/90</div> <div style="float: right; width: 20px; text-align: center;">10/31/99</div> <div style="clear: both;"></div> <div style="text-align: center;">UTILITY PATENT APPLICATION TRANSMITTAL <small>Only for new nonprovisional applications under 37 CFR 1.53(b))</small></div>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">Attorney Docket No.</td><td style="width: 50%;">35.C11664 DI</td></tr><tr><td colspan="2" style="text-align: center;">First Named Inventor or Application Identifier</td></tr><tr><td colspan="2">KEIICHI IWAMURA</td></tr><tr><td>Express Mail Label No.</td><td></td></tr></table>	Attorney Docket No.	35.C11664 DI	First Named Inventor or Application Identifier		KEIICHI IWAMURA		Express Mail Label No.													
Attorney Docket No.	35.C11664 DI																					
First Named Inventor or Application Identifier																						
KEIICHI IWAMURA																						
Express Mail Label No.																						
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231																				
<div style="display: flex; flex-wrap: wrap;"><div style="width: 50%;"><p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p><p>2. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="46"/></p><p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets <input type="text" value="6"/></p><p>4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <input type="text" value="2"/></p><div style="margin-left: 20px;"><p>a. <input type="checkbox"/> Newly executed (original or copy)</p><p>b. <input type="checkbox"/> Unexecuted for information purposes</p><p>c. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]</p><p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p></div><p>5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p></div><div style="width: 50%;"><p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p><p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p><div style="margin-left: 20px;"><p>a. <input type="checkbox"/> Computer Readable Copy</p><p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p><p>c. <input type="checkbox"/> Statement verifying identity of above copies</p></div></div></div>		ACCOMPANYING APPLICATION PARTS <div style="border: 1px solid black; padding: 5px;"><p>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p><p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p><p>10. <input type="checkbox"/> English Translation Document (if applicable)</p><p>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p><p>12. <input checked="" type="checkbox"/> Preliminary Amendment</p><p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p><p>14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application Status still proper and desired</p><p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p><p>16. <input type="checkbox"/> Other: _____</p></div>																				
<p>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:</p> <div style="display: flex; align-items: center;"><input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. 08/706,491</div>																						
18. CORRESPONDENCE ADDRESS																						
<div style="display: flex; align-items: center;"><div style="border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/> Customer Number or Bar Code Label</div><div style="border: 1px solid black; padding: 2px; margin: 0 10px;">05514 <small>(Insert Customer No. or Attach bar code label here)</small></div><div style="margin-left: 20px;">or <input type="checkbox"/> Correspondence address below</div></div>																						
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20%;">NAME</td><td colspan="4"></td></tr><tr><td>Address</td><td colspan="4"></td></tr><tr><td>City</td><td style="width: 20%;">State</td><td style="width: 20%;">Zip Code</td><td colspan="2"></td></tr><tr><td>Country</td><td>Telephone</td><td>Fax</td><td colspan="2"></td></tr></table>			NAME					Address					City	State	Zip Code			Country	Telephone	Fax		
NAME																						
Address																						
City	State	Zip Code																				
Country	Telephone	Fax																				



CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	30-20 =	10	X \$ 18.00 =	\$ 180.00
	INDEPENDENT CLAIMS (37 cfr 1.16(b))	8-3 =	5	X \$ 78.00 =	\$ 390.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$260.00 =	\$
				BASIC FEE (37 CFR 1.16(a))	\$ 760.00
			Total of above Calculations =		\$1,330.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
	TOTAL =				\$1,330.00

19. Small entity status

- a. ☐ A Small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.


20. ☒ A check in the amount of \$ 1,330.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ _____ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☐ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Brian L. Klock - Registration No. 36,570
SIGNATURE	
DATE	June 16, 1999